



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

| | | | |
|---|---------|------------|--------------|
| PART I LOBBYIST | | | |
| NAME (Last) | (First) | (Middle) | TELEPHONE |
| Markle | Joanna | J.H. | 808-547-5600 |
| MAILING ADDRESS (Street) | | | FAX |
| 1099 Alakea Street, Suite 1800 | | | 808-547-5880 |
| (City) | (State) | (Zip Code) | |
| Honolulu | HI | 96813 | |
| EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) | | | TELEPHONE |
| Goodsill Anderson Quinn & Stifel | | | 808-547-5600 |
| MAILING ADDRESS (Street) | | | FAX |
| 1099 Alakea Street, Suite 1800 | | | 808-547-5880 |
| (City) | (State) | (Zip Code) | |
| Honolulu | HI | 96813 | |

| | | |
|--|---------|------------|
| PART II ORGANIZATION | | |
| NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) | | TELEPHONE |
| FedState Strategic Consulting, Inc. on behalf of Realogy Corporation | | 742 4311 |
| MAILING ADDRESS (Street) | | FAX |
| 101 CONSTITUTION AVE NW STE 700 | | 742 4271 |
| (City) | (State) | (Zip Code) |
| WASHINGTON | DC | 20001 |
| NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT | | TELEPHONE |
| CARRIE A. HARTGEN | | 742 4311 |
| MAILING ADDRESS (Street) | | FAX |
| 101 CONSTITUTION AVE NW STE 700 | | 742 4271 |
| (City) | (State) | (Zip Code) |
| WASHINGTON | DC | 20001 |

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input checked="" type="checkbox"/> Other: (indicate below) <u>Taxation</u> |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Samuel H. Wright
(Signature of Lobbyist)

9/26/06
(Date)

PART V AUTHORIZATION TO LOBBY

NAME TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

SAMUEL H. WRIGHT, EMP. GOVT. RELATIONS

NAME OF ORGANIZATION (if applicable)

SAME AS PART II

TELEPHONE

202 742 4270

MAILING ADDRESS (Street)

FAX

202 742 4271

(City)

(State)

(Zip Code)

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

Samuel H. Wright
(Signature of Authorizing Officer or Person Represented)

9/26/06
(Date)